

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 509280	RECEIPT DATE:	03 / 27 / 00
IA NUMBER:	PCT/ SG99 / 00142	IA FILING DATE:	12 / 16 / 99
FAMILY NAME:	KELLOCK	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	PETER ROWAN	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	12 / 16 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	SPR6147P0010	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:		CUSTOMER NUMBER:	000000
		TELEPHONE	3126165400
		FAX	
NAME:	ROCKEY MILNAMOW & KATZ		
	TWO PRUDENTIAL PLAZA		
STREET:	180 NORTH STETSON AVENUE		
	47TH FLOOR		
CITY:	CHICAGO		
STATE/COUNTRY:	IL	ZIP:	60601
EMAIL:			
APPLICATION TITLES:			
	SYSTEM AND METHOD FOR VIDEO PRODUCTION		

TAB TO LAST POSITION,PUSH SEND



Bib Data Sheet


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SERIAL NUMBER 09/509,280	FILING DATE 03/20/2000 RULE -	CLASS 348	GROUP ART UNIT 2711	ATTORNEY DOCKET NO. SPR6147P0010
APPLICANTS PETER ROWAN KELLOCK, SINGAPORE, SINGAPORE; SRIKUMAR KARAIKUDI SUBRAMANIAM, SINGAPORE, SINGAPORE; RAMANATH PADMANABHAN, SINGAPORE, SINGAPORE; LIANG KEE GOH, SINGAPORE, SINGAPORE;				
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/SG99/00142 12/16/1999				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/13/2000 -				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		STATE OR COUNTRY SINGAPORE	SHEETS DRAWING 17	TOTAL CLAIMS 99
			INDEPENDENT CLAIMS 6	
ADDRESS ROCKEY MILNAMOW & KATZ TWO PRUDENTIAL PLAZA 180 NORTH STETSON AVENUE 47TH FLOOR CHICAGO ,IL 60601				
TITLE SYSTEM AND METHOD FOR VIDEO PRODUCTION				
FILING FEE RECEIVED 2626	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	